

11

Audit Expert - Select Policy

File Tools Help

Choose Insured Name - then press Select

Select

Survey ☐ Audit ☒

Close

Ready 11/7/00 9:25 AM

FIG. I.

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Audit Expert - Select Policy		<input type="button" value="File"/> <input type="button" value="Tools"/> <input type="button" value="Help"/>	
<input type="button" value="LAND CO BUILDING &amp; REMODELING, INC."/>		<input type="button" value="BILL LANDRY DBA"/>	
Insured info Address: 125 OSAGE WAY SUMMERVILLE, SC 29483 Contact: BILL LANDRY Phone: (843)851-8344 Fax:	Agent info PREFERRED MARKETS INC. 1300 INDIAN WELLS CT MURRELS INLET, SC 29576 FEIN: 571052069 Phone: (800)550-8054 ext: Fax: (800)354-3573	Policy info Policy# <input type="text" value="0000214673"/> <input type="text" value="A"/> Est. Premium: Effective: 9/10/99 to 9/10/00	
<input type="button" value="Ready"/>		<input type="button" value="Close"/>	
		<input type="text" value="11/7/00"/>	<input type="text" value="9:29 AM"/>

FIG. 2.

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Audit Expert Survey - Mary Lemelle

E. Personnel

F. Occupational Exposures

G. Evaluation

H. Flag Listing

A. Survey Information

B. WC Legal Issues

C. Operations

D. Equipment

Survey Start

Survey started on 9/29/99. Finished on 10/13/99

Placed unsuccessful call#: 2 on: 10/13/99

Set appointment

Contact info

Consultant: Jerard Brasseaux

Listed Contact: BILL LANDRY

Actual contact: Bill

Contact Phone: (843)851-8344

Insured: LAND CO BUILDING & REMODELING, INC.

Contact: BILL LANDRY

Nature of Business: REMODELING

Type of company:

Ready

11/7/00

9:27 AM

Script on

FIG. 3.

Audit Expert Survey - Mary Lemelle				
E. Personnel	F. Occupational Exposures	G. Evaluation	H. Flag Listing	
A. Survey Information	B. WC Legal Issues	C. Operations	D. Equipment	

A. Are the following notice(s) prominently posted in a conspicuous place where they would be visible by all employees everyday?

- Employee Notice
 

<input type="radio"/> Yes	<input checked="" type="radio"/> No	<input type="radio"/> Unknown
---------------------------	-------------------------------------	-------------------------------
- Physician's Panel (GA,PA,TN,VA)
 

<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Unknown
---------------------------	--------------------------	-------------------------------
- FL only: Has the Insured notified it's employees how to contact Cunningham Lindsey for medical referral?
 

<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Unknown
---------------------------	--------------------------	-------------------------------

B. Who is the person responsible for reporting WC claims and for completing the Employer's First Report of Injury or Occupational Disease?

Name

Does that person understand that they are to report ALL claims immediately to the Legion Villanova Call Center at (888)892-4381 or by fax to (888)839-0368?

<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Unknown
--------------------------------------	--------------------------	-------------------------------

Insured: LAND CO BUILDING & REMODELING, INC.  
 Contact: BILL LANDRY  
 Nature of Business: REMODELING  
 Type of company:

Ready

FIG. 4.

**5. F/G.**

**5. F/G.**

FIG. 6.

FIG. 6.

# REPLACEMENT SHEET

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**Audit Expert Survey - Mary Lemelle**

**A. Survey Information** **B. WC Legal Issues** **C. Operations** **D. Equipment**

**E. Personnel** **F. Occupational Exposures** **G. Evaluation** **H. Flag Listing**

**Special Exposures/Controls**

☐ Confined spaces ☐ Other:

☐ Elevated areas

☐ Below ground

**Health Exposure/Controls**

☐ Asbestos removal ☐ Lead Paint Removal ☐ Hazardous Materials ☐ Over Water

**Demolition or Blasting?** ☐ Yes ☒ No

**Snowplow Public Roads?** ☐ Yes ☒ No

**Out of State Work** ☐ Yes ☐ 30 Consecutive Days

**Roof Repair or Replacement?** ☐ Yes ☒ No

**Insured: LAND CO BUILDING & REMODELING, INC.**  
**Contact: BILL LANDRY**  
**Nature of Business: REMODELING**  
**Type of company:**

**Script on**

**Ready**

**FIG. 7.**

Audit Expert Survey - Mary Lemelle

☐ A. Survey Information   
 ☒ B. WC Legal Issues   
 ☐ C. Operations   
 ☐ D. Equipment

☐ E. Personnel   
 ☐ F. Occupational Exposures   
 ☐ G. Evaluation   
 ☐ H. Flag Listing

Your Subjective Evaluation  
☒ Good    ☐ Fair    ☐ Poor

Comparison to other similar companies  
☐ Above Average    ☒ Average    ☐ Below Average

Contact refused questions about:  
☐ A. Refused Survey  
☐ B. WC Legal Issues  
☐ C. Operations  
☐ D. Equipment  
☐ E. Personnel  
☐ F. Occupational Exposure

Survey Status  
**Finished**  
 Completed: 10/13/99  
 Print Survey

Re-Open Survey    Delete Consultant

Additional Comments  
 Insured has recently hired an employee, in which he estimates paying him about \$18,000 per year. Insured was not sure how much he pays out to each individual subcontractor, but he said the total paid out per year for all subs is about \$200,000.

Insured: LAND CO BUILDING & REMODELING, INC.  
 Contact: BILL LANDRY  
 Nature of Business: REMODELING  
 Type of company:

Script on  
 Ready    11/7/00    9:45 AM

FIG. 8.

Audit Expert Survey - Mary Lemelle

A. Survey Information

B. WC Legal Issues

C. Operations

D. Equipment

E. Personnel

F. Occupational Exposures

G. Evaluation

H. Flag Listing

Flag Listing

- 0 Points: Informative: Employee Notice is not Posted

- 10 Points: Payroll amount: (\$18,000.00) > listed on policy: (\$1.00)

Insured: LAND CO BUILDING & REMODELING, INC.

Contact: BILL LANDRY

Nature of Business: REMODELING

Type of company:

Ready

11/7/00

9:45 AM

Script on

FIG. 9.

**19A**

Audit Expert Survey - Mary Lemelle

E. Personnel

A. Survey Information

F. Occupational Exposures

B. WC Legal Issues

G. Evaluation

C. Operations

H. Flag Listing

D. Equipment

Is all equipment consistent with operations?

☒ Yes

☐ No

Insured: LAND CO BUILDING & REMODELING, INC.

Contact: BILL LANDRY

Nature of Business: REMODELING

Type of company:

Script on

Ready

11/7/00

9:45 AM

**FIG. 11.**

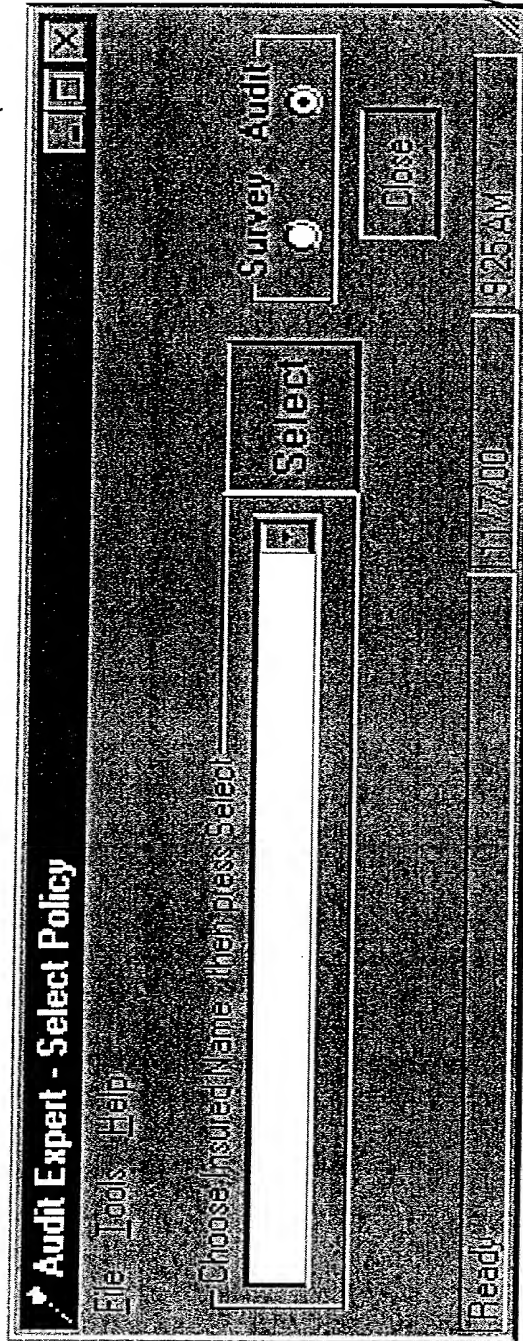


Figure 1



**Audit Expert - Select Policy**

File Tools Help

**LAND CO BUILDING & REMODELING, INC.**

**BILL LANDRY DBA**

<b>Insured Info</b>	<b>Agent Info</b>
<b>Address</b> 12505 ACERWAY SUMMERVILLE SC 29486	<b>PREFERRED MARKETS INC</b> 1300 INDIAN WELLS CT MIRABELLS INLET SC 29576
<b>Contact</b> BILL LANDRY	<b>Agent</b> 571053055
<b>Phone</b> (803) 851-8844	<b>Phone</b> (803) 560-8054
<b>Fax</b>	<b>Fax</b> (803) 564-3574
<b>Policy Info</b>	
<b>Policy #</b> 0000214673 <b>A</b> <b>Est Premium</b>	
<b>Effective</b> 3/1/99 <b>to</b> 3/31/00	

**Ready** **11:17:00** **9/29/98**

**Close**

**Figure 2**

**Audit Expert Survey - Mary Lemelle**

Survey Start: \_\_\_\_\_

Survey Started on 9/28/99 Finished on 10/15/99

Place in successful cell: **2** on 10/13/99

**Subpopulation**

1

Contacting: \_\_\_\_\_

Consultant: Valdis Biesseck  
 Licensed: Bill Landry  
 Accredited: Bill  
 Contact phone: (800) 551-8844

Business: LAND ON BUILDING REMEDIATION, INC.  
 Contact: BILL LANDRY  
 Nature of Business: REMEDIATION  
 Type of company: \_\_\_\_\_

Ready 10/17/99 13:29:29

**Figure 3**

**Audit Expert Survey - Mary Lemelle**

**A Survey Information** **B W/C Legal Issues** **C Operation** **D Equipment**

**I. Employee Notice**

Are the following notices prominently posted in conspicuous place where they would be visible to all employees everyday?

☒ Yes ☒ No ☐ Unknown

**II. Employee Notice**

Did you or the employer provide the employee with a copy of the employee's rights to file a claim with the state or federal government?

☒ Yes ☐ No ☐ Unknown

**III. Employee Notice**

Did you or the employer provide the employee with a copy of the employee's rights to file a claim with the state or federal government?

☒ Yes ☐ No ☐ Unknown

**IV. Employee Notice**

Did you or the employer provide the employee with a copy of the employee's rights to file a claim with the state or federal government?

☒ Yes ☐ No ☐ Unknown

**V. Employee Notice**

Did you or the employer provide the employee with a copy of the employee's rights to file a claim with the state or federal government?

☒ Yes ☐ No ☐ Unknown

**VI. Employee Notice**

Did you or the employer provide the employee with a copy of the employee's rights to file a claim with the state or federal government?

☒ Yes ☐ No ☐ Unknown

**Ready** **Save**

**Figure 4**

**Audit Expert Survey - Mary Lemelle**

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**Enter record** **F Occupational Exposure** **E Evaluation** **H Hazardous**

**A Survey Information** **B With Legal Issues** **C Operations** **D Equipment**

**Total Years in Business**  **Current owner more than 2 years** ☐ Yes ☒ No

**Describe Operations**  **Annual Revenue**  **Are Subcontractors used** ☐ Yes ☒ No

**5022 - MASONRY NOC**

	App	Applicant	Back	Other
<input type="text" value="PLUMBING NOC &amp; Drivers"/>	<input checked="" type="checkbox"/>	<input type="text" value="Y"/>	<input type="radio"/> Yes	<input type="radio"/> No
<input type="text" value="ELECTRICAL WIRING - WITHIN BUILDINGS"/>	<input checked="" type="checkbox"/>	<input type="text" value="Y"/>	<input type="radio"/> Yes	<input type="radio"/> No
<input type="text" value="MASONRY NOC"/>	<input checked="" type="checkbox"/>	<input type="text" value="Y"/>	<input type="radio"/> Yes	<input type="radio"/> No
<input type="text" value="EXCAVATION &amp; Drivers"/>	<input checked="" type="checkbox"/>	<input type="text" value="N"/>	<input type="radio"/> Yes	<input type="radio"/> No
<input type="text" value="CARPENTRY NOC"/>	<input checked="" type="checkbox"/>	<input type="text" value="Y"/>	<input type="radio"/> Yes	<input type="radio"/> No
<input type="text" value=""/>	<input checked="" type="checkbox"/>	<input type="text" value=""/>	<input type="radio"/> Yes	<input type="radio"/> No

**ROBERT LAND CONSTRUCTION REMODELING INC**  
**CONCRETE, BRICK, LANDSCAPE**  
**INDUSTRIAL BUSINESS REMODELING**  
**THREE COMPANY**

**RECORD** **10/27/00** **SIGNATURE** **Signature**

**Figure 5**

## Figure 6

## Figure 6

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**Audit Expert Survey - Mary Lemelle**

**A. Survey Information**      **B. W/C Legality Issues**      **C. Workplace**      **D. Equipment**

**E. Personnel**      **F. Occupational Exposures**      **G. Evaluation**      **H. Registration**

**Special Exposures/Controls**

☐ Confined space    ☐ Other

☐ Elevated area

☐ Below ground

**Health Exposures/Controls**

☐ Asbestos    ☐ Lead/Pb    ☐ Hazardous    ☐ Other

☐ Removal    ☐ Removal    ☐ Material    ☐ Work

**Demolition or Abandonment**

☐ Yes    ☒ No

**Removal or Abandonment**

☐ Yes    ☒ No

**Material State: Work**

☐ Yes    ☒ 30 consecutive days

**Insured: DANIEL SUPERIOR REMODELING, INC.**

**Owner: BILL JANDRY**

**Nature of Business: REMODELING**

**Type of Complaint:**

**Ready**      **11/27/00**      **12:00 AM**

**Options**

**Figure 7**

**Audit Expert Survey - Mary Lemelle**

**A. Survey Information**   **B. W/C Legal Issues**   **C. Operation**   **D. Equipment**

**E. Personnel**   **F. Occupational Exposures**   **G. Evaluation**   **H. Regulating**

**Your Subjective Evaluation**

☒ Good   ☐ Fair   ☐ Poor

**Comparison to other similar companies**

☐ Above Average   ☒ Average   ☐ Below Average

**Additional Comments**

Insured has recently hired an employee, in which he estimates paying him about \$18,000 per year. Insured was not sure how much he pays out to each individual subcontractor, but he said the total paid out per year for all subs is about \$200,000.

**Re Open Survey**   **Delete Consultant**

**Contacted questions about:**

☐ A. Refused survey  
☐ B. W/C Legal Issue  
☐ C. Operation  
☐ D. Equipment  
☐ E. Personnel  
☐ F. Occupational Exposures

**Survey Status**

**Finished**

**Completed 10/15/99**

**Print Survey**

**Insured: LAND CONSTRUCTION REMEDIATING INC**  
**Contact: BILL LANDS**  
**Nature of Business: REMEDIATING**  
**Type of company:**

**Ready**   **10/17/00**   **9:45AM**   **Session**

**Figure 8**

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Audit Expert Survey - Mary Lemelle

A Survey Information

B Personnel

C Workers Legal Issues

D Equipment

E Operations

F Occupational Exposure

G Evaluation

H Flag Listing

Flag Listing

-0 Points: Informative: Employee Notice is not Posted

-10 Points: Payroll amount: (\$18,000.00) > listed on policy: (\$1.00)

Insured: LAND CONSTRUCTING & REMODELING, INC.

Address: BILLY LAMON

Name of Business: REMODELING

Type of company:

Ready

11/27/00

10:46 AM

Help

Figure 9

Audi Expert Survey - Mary Lemelle

E. Personnel

F. Occupational Exposures

G. Evaluation

H. Flag Listing

A. Survey Information

B. WC Legal Issues

C. Operations

D. Equipment

Is all equipment consistent with operations?

☐ Yes

☒ No

Insured: LAND CO. BUILDING & REMODELING, INC.

Contact: BILL LANDRY

Nature of Business: REMODELING

Type of company:

Ready

Stop

9:35 AM

11/7/00

Figure 11